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Linda A. Jernigan (Signature)

FROM: **Linda S. Jernigan** Typed or printed name of person signing Certificate)

Fax No. 513-622-3300

Phone No. 513-622-2811

Listed below are the item(s) being submitted with this Certificate of Transmission: **

- 1) Fee Transmittal - orig. w/copy
- 2) Notice of Appeal - orig. w/copy

Number of Pages:

Inventors: Cimiluca et al.

S.N.: 10/633970

Filed: August 4, 2003

Case: P&G Docket No. 9153R

FEE TRANSMITTAL

for FY 2003

Patent fees are subject to annual revision.

Effective December 8, 2004


Complete if Known

Application Number	10/633970
Confirmation Number	5176
Filing Date	August 4, 2003
First Named Inventor	Cimiluca et al.
Examiner Name	Everett White
Art Unit	1623
Attorney Docket No.	9153R

TOTAL AMOUNT OF PAYMENT (\$500)

METHOD OF PAYMENT				FEE CALCULATION (continued)																															
<p>1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:</p> <p>Deposit Account Number: 16-2480</p> <p>Deposit Account Name: The Procter & Gamble Company</p>				<p>5. ADDITIONAL FEES</p> <table border="1"> <thead> <tr> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Extension for reply within 1st month</td> <td>(\$120) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 2nd month</td> <td>(\$450) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 3rd month</td> <td>(\$1,820) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 4th month</td> <td>(\$1,590) <input type="checkbox"/></td> </tr> <tr> <td>Extension for reply within 5th month</td> <td>(\$2,160) <input type="checkbox"/></td> </tr> <tr> <td>Information Disclosure Statement fee</td> <td>(\$180) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>37 CFR 1.17 (q) Missing Parts (provisional)</td> <td>(\$50) <input type="checkbox"/></td> </tr> <tr> <td>Non-English specification</td> <td>(\$130) <input type="checkbox"/></td> </tr> <tr> <td>Notice of Appeal</td> <td>(\$500) [500]</td> </tr> <tr> <td>Filing a brief in support of an appeal</td> <td>(\$500) <input type="checkbox"/></td> </tr> <tr> <td>Request for oral hearing</td> <td>(\$1,000) <input type="checkbox"/></td> </tr> <tr> <td>Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)</td> <td>(\$1,370) <input type="checkbox"/></td> </tr> <tr> <td>Other:</td> <td><input type="checkbox"/></td> </tr> </tbody> </table>		Fee Description	Fee Paid	Extension for reply within 1 st month	(\$120) <input type="checkbox"/>	Extension for reply within 2 nd month	(\$450) <input type="checkbox"/>	Extension for reply within 3 rd month	(\$1,820) <input type="checkbox"/>	Extension for reply within 4 th month	(\$1,590) <input type="checkbox"/>	Extension for reply within 5 th month	(\$2,160) <input type="checkbox"/>	Information Disclosure Statement fee	(\$180) <input type="checkbox"/>	37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130) <input type="checkbox"/>	37 CFR 1.17 (q) Missing Parts (provisional)	(\$50) <input type="checkbox"/>	Non-English specification	(\$130) <input type="checkbox"/>	Notice of Appeal	(\$500) [500]	Filing a brief in support of an appeal	(\$500) <input type="checkbox"/>	Request for oral hearing	(\$1,000) <input type="checkbox"/>	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	(\$1,370) <input type="checkbox"/>	Other:	<input type="checkbox"/>
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<p>3. APPLICATION SIZE FEE:</p> <p>Sheets of Spec and Drawings <input type="checkbox"/></p> <p>(\$250 for each 50 sheets in excess of 100, except for sequence and program listings)</p> <p>SUBTOTAL (2)+(3) (\$) <input type="checkbox"/></p>																																			
<p>4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:</p> <table border="1"> <thead> <tr> <th></th> <th>Extra Claims</th> <th>Fec from Below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>Total Claims</td> <td>[] - 20** = [] x</td> <td><input type="checkbox"/></td> <td>= <input type="checkbox"/></td> </tr> <tr> <td>Independent Claims</td> <td>[] - 3** = [] x</td> <td><input type="checkbox"/></td> <td>= <input type="checkbox"/></td> </tr> <tr> <td>Multiple Dependent claims:</td> <td></td> <td><input type="checkbox"/></td> <td>= <input type="checkbox"/></td> </tr> </tbody> </table> <p>** or number previously paid, if greater; For Reissues, see below</p> <p>Fee Description</p> <p>Claims in excess of 20 (\$50 per claim)</p> <p>Independent claims in excess of 3 (\$200 per claim)</p> <p>Multiple dependent claim, if not paid (\$360)</p> <p>**Reissue: each independent claim over 3 and more than in the original patent (\$200 per claim)</p> <p>**Reissue claims: each claim over 20 and more than original patent (\$50 per claim)</p> <p>SUBTOTAL (4) (\$) <input type="checkbox"/></p>					Extra Claims	Fec from Below	Fee Paid	Total Claims	[] - 20** = [] x	<input type="checkbox"/>	= <input type="checkbox"/>	Independent Claims	[] - 3** = [] x	<input type="checkbox"/>	= <input type="checkbox"/>	Multiple Dependent claims:		<input type="checkbox"/>	= <input type="checkbox"/>	<p>SUBTOTAL(5) (\$) [500]</p>															
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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Cynthia L. Clay	Registration No.	54,930
Signature	<i>Cynthia L. Clay</i>	(Attorney/Agent)	
		Telephone	(513) 622-0291
		Date	2/25/05


 This collection of information is required by 37 CFR 1.17. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 128 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary, depending upon individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P. O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND PILES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

FEE TRANSMITTAL

for FY 2005

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Effective December 8, 2004

Complete if Known

Application Number	10/633970
Confirmation Number	5176
Filing Date	August 4, 2003
First Named Inventor	Cimiluca et al.
Examiner Name	Everett White
Art Unit	1623
Attorney Docket No.	9153R

TOTAL AMOUNT OF PAYMENT (\$500)

METHOD OF PAYMENT

1. [X] The Director is hereby authorized to charge indicated fees submitted on this form, credit any over payments, and charge any additional fee(s) during the pendency of this application to:

Deposit Account Number: 16-2480

Deposit Account Name: The Procter & Gamble Company

FEE CALCULATION

2. BASIC FILING FEE - Large Entity

	FILING FEE	SEARCH FEE	EXAMINATION FEE	Fee Paid
Application Type				
Utility	(\$300)	(\$500)	(\$200)	(Total = \$1000) <input type="checkbox"/>
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Reissue	(\$300)	(\$500)	(\$600)	(Total = \$1400) <input type="checkbox"/>
Provisional filing fee			(Total = \$200) <input type="checkbox"/>	

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(\$250 for each 50 sheets in excess of 100, except for sequence and program listings)

SUBTOTAL (2)+(3) (\$)☐

4. EXTRA CLAIM FEES FOR UTILITY AND REISSUE:

	Extra Claims	Fee from Below	Fee Paid
Total Claims <input type="checkbox"/> - 20** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>
Independent Claims <input type="checkbox"/> - 3** = <input type="checkbox"/> x	<input type="checkbox"/>	=	<input type="checkbox"/>
Multiple Dependent claims:	<input type="checkbox"/>	=	<input type="checkbox"/>

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SUBTOTAL (4) (\$)☐

FEE CALCULATION (continued)

5. ADDITIONAL FEES

Fee Description	Fee	Fee Paid
Extension for reply within 1 st month	(\$100)	<input type="checkbox"/>
Extension for reply within 2 nd month	(\$450)	<input type="checkbox"/>
Extension for reply within 3 rd month	(\$1,000)	<input type="checkbox"/>
Extension for reply within 4 th month	(\$1,500)	<input type="checkbox"/>
Extension for reply within 5 th month	(\$2,100)	<input type="checkbox"/>
Information Disclosure Statement fee	(\$100)	<input type="checkbox"/>
37 CFR 1.16(e) Late Oath/Declaration (nonprovisional)	(\$130)	<input type="checkbox"/>
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Non-English specification	(\$130)	<input type="checkbox"/>
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Request for oral hearing	(\$1,000)	<input type="checkbox"/>
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SUBTOTAL(5) (\$) [500]

SUBMITTED BY

Name (Print/Type)

Cynthia L. Clay

Registration No.
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54,930

Complete (if applicable)

Telephone

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Form 2000.doc (Revised for P&G use 01/24/2005)

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UNITED STATES PATENT
AND TRADEMARK OFFICE
MAR 10 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No. : 10/633970
Applicant(s) : Cimiluca et al.
Filed : August 4, 2003
Title : Compositions Comprising A Plurality Of Particles
Or Agglomerates Having A Defined Particle Size
TC/A.U. : 1623
Examiner : Everett White
Conf. No. : 5176
Docket No. : 9153R
Customer No. : 27752

NOTICE OF APPEAL FROM THE EXAMINER TO

THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents

P. O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is \$500 (37 CFR 41.20(b)(1)).

The Director is hereby authorized to charge the above fees, or any additional fees that may be required, or credit any overpayment to Deposit Account No. 16-2480 in the name of The Procter & Gamble Company. An additional copy of this Notice is enclosed for that purpose.

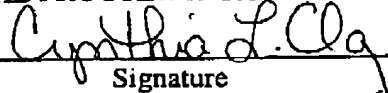
I am:

- ☐ an attorney or agent of record.
- ☐ an attorney or agent acting under 37 CFR 1.34(a).

[X] authorized to act on behalf of the assignee of record of the entire interest, The Procter & Gamble Company. See 37 CFR 3.71. The assignment was recorded on November 12, 2003 at reel 014121 frame 0916.

Respectfully submitted,

THE PROCTER & GAMBLE COMPANY


Signature

Cynthia L. Clay

Typed or printed name

Registration No. 54, 930

(513) 622-0291

Date: February 25, 2005

Customer No. 27752

(AppnoL.doc) (Last Revised 11/5/2004)

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